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ib Data Sheet

CONFIRMATION NO. 7082

|                             |                                       |              |                        |                                      |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER<br>10/759,246 | FILING DATE<br>01/20/2004<br><br>RULE | CLASS<br>324 | GROUP ART UNIT<br>2858 | ATTORNEY DOCKET<br>NO.<br>05165.1280 |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|

## APPLICANTS

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CONTINUING DATA \*\*\*\*\*

NONE, MK

FOREIGN APPLICATIONS \*\*\*\*\*

NONE, MK

REQUIRED, FOREIGN FILING LICENSE GRANTED  
04/21/2004

|   |                           |                        |                       |                            |
|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR<br>COUNTRY<br>WA | SHEETS<br>DRAWING<br>9 | TOTAL<br>CLAIMS<br>23 | INDEPENDENT<br>CLAIMS<br>3 |
| USC 119 (a-d) conditions met<br><input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                           |                        |                       |                            |
| Examined and Acknowledged<br>N. Hammel<br>Examiner's Signature  |                           |                        |                       |                            |
|   |                           |                        |                       |                            |

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## TITLE

Thickness measuring systems and methods using a cavity resonator

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|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>824 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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